

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.M.		08/30/01
O.I.P.E. CLASSIFIER		43	9/6/01
FORMALITY REVIEW	U.M.	572	1/09/01
RESPONSE FORMALITY REVIEW	TR	1112	3/20/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	2-2-03
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Claim	Date
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If more than 150 claims or 10 actions  
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